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SKETCH OF THE PROGRESS  
OF THE  
MALIGNANT OR EPIDEMIC  
CHOLERA,  
FROM ITS ARRIVAL IN AMERICA.

WITH

TABLES ILLUSTRATIVE OF ITS PROGRESS IN THE PRINCIPAL CITIES IT HAS VISITED.

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BY EDWARD WARREN, M. D.

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# PROGRESS OF THE CHOLERA IN AMERICA.

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AT the present moment it seems particularly desirable to bring into one view the invasions by the great epidemic of different parts of this country. Such an investigation is at this time important, in order, that we may have data for judging of the probable course of the disease in different cities. The questions of contagion and of quarantine, both of great practical consequence, require the aid of all the known facts, as soon as may be. These considerations have induced the writer to turn his attention to the subject, and add another to the innumerable books on cholera.

## CANADA.—*Quebec.*

According to the account of Dr. Nelson, cases of cholera occurred in Montreal, as early as the first of April in the present year. They were however few in number, and soon disappeared. By the first of June, the disease appeared again, but in a very mild form, in the northern and eastern parts of the town, among the natives, who had little or no intercourse with the port.

As there had been no alarm excited by the arrival of a vessel from an infected port, or of one, on board which persons had died of cholera, at the time when these cases first occur-

red ; they were considered as cases of the common cholera of the country. But on the 3d of June, the brig Carricks arrived at Grosse Island, the quarantine ground, thirty-nine miles below Quebec ; having on board one hundred and thirty-three passengers. Thirty-nine deaths had taken place during the passage, of a disease, the symptoms of which corresponded with those of the malignant cholera. This arrival produced considerable excitement, both at Quebec and Montreal, and commissioners (Dr. Morrin and Mr. Young) were directed by the Quebec Board of Health to proceed to Grosse Island, and ascertain the facts of the case. They visited Grosse Island on the 7th of June, and examined the passengers, all of whom had been detained at the emigrant shed at quarantine. They reported, as the result of this examination, that the passengers were all in perfect health ; that the disease had occurred soon after the vessel sailed ; and that the last death had been on the 9th of May, twenty-five days before her arrival at Grosse Isle. Since that time, the surviving passengers had enjoyed good health. The Carricks had been thoroughly cleansed, and set sail on the 7th June, all on board being well. But at the very moment when the Quebec Board of Health were issuing their proclamation to prove the impossibility of the importation of the disease by the Carricks, the cholera had already broken out in Quebec.

The first place, in which the malignant cholera manifested itself in this city, was a boarding-house in Champlain Street, kept by a person by the name of Roach. The first patient was an emigrant landed from the steam-boat Voyageur, which plied between Montreal and Quebec. This boat left the latter place Thursday evening, June 7th, received passengers, it is said, from different emigrant vessels in the river ; and the weather becoming stormy, was obliged to return to Quebec, where she landed about two hundred passengers, most of whom found lodgings in the neighborhood of Champlain Street. She then proceeded to Montreal, and before her arrival an emigrant passenger had died on board.

On the afternoon of the 9th, a second case occurred in the person of an individual, who was taken ill whilst at work on a wharf, and sent to the hospital, where he died. In the same evening, four others were seized with the malady, sent to the hospital, and died. Five out of seven of the first cases which occurred, were emigrants, as it is said, landed from the steam-boat Voyageur. The parts of the town, where most of them took place, was low, filthy, and ill ventilated. The disease, however, far from extending regularly from one point, spread into almost every part of the town, and displayed itself in the most virulent and destructive forms. Between the evening of the 8th and 9, A. M. of the 11th, seventy deaths had taken place, some in every part of the city. On the 11th, the Board of Health first acknowledged the existence of the cholera in the city. They reported thirty-four deaths within forty-eight hours.

About the fourth day of the disease, June 12th, it began to appear in the more elevated situations, and among the wealthier classes, persons who could have very little intercourse with those among whom it first appeared. Several neighboring parishes, some few miles from the city, were attacked about this time. It had appeared at Point Levi, on the opposite shore of the St. Lawrence, at Beauport, and at Little River.

The cases continued to increase until about the 18th, when they began to diminish both in number and force; the disease still prevailing most extensively in the ill ventilated parts of the city. When it was at its height, about the eighth or tenth day, the number of cases was estimated at two hundred and fifty, or three hundred, in twenty-four hours.

We have annexed a table, which, though not as complete as we could wish, will serve to show the progress of the disease. The first report of the Board of Health, was issued upon the 11th of June. The cases in the hospitals, it will be seen, stood then at about thirteen new cases, eleven deaths; being, however, but a small part of the number which occurred in the city. The disease having arrived at its height, began gradual-

ly, but irregularly, to diminish, cases continuing, however, to occur, sometimes in greater numbers, sometimes in less. During the month of August, the number of deaths by cholera appear to have been from two to eight daily.

*Cholera in Montreal.*—Cases of cholera, as already mentioned, occurred in Montreal early in April, an unusual season for the cholera of the country, which does not generally commence until the month of June. They were however of a mild form, and soon disappeared. By the first of June, diarrhoea had become a common feature in every disease; some mild cases of cholera also occurred. On the 9th, as above mentioned, a case of malignant cholera occurred on board the *Voyageur*, and terminated fatally. On the 10th, another emigrant, from the same boat, was seized with the disease, after an evening of dissipation, and died the next day. The same night, several natives who had held no intercourse with the port, or with each other, were taken ill. The first case occurred near the old Market House; the cases on the 10th, were in St. Lawrence suburbs, and in Sanguinette Street, distant about half a mile from the old Market House. Other cases immediately sprung up in numerous and different points; principally in the St. Lawrence suburbs, back of the town, the Quebec suburbs, north of the town, and the St. Louis suburbs, between the two last. The disease extended rapidly toward the town, at first attacking natives principally, and afterwards emigrants who had resided a year or more in the town. Few cases appeared on the streets adjacent to the river, or the river bank, where the emigrants were bivouacked, barely protected from the weather by pieces of scantling supporting old blankets, rugs, or similar materials.\* The more wealthy classes were next attacked, and suffered as severely as the others; while the parts of the town bordering on the port were last attacked.

The disease advanced with unexampled rapidity; after rav-

\* Report of the Philadelphia deputation.

aging the poor, it extended to all classes ; attacking alike those few who had suffered absolute exclusion, and sparing vast numbers of those who were constantly exposed. A few medical men suffered from the disease ; and one student perished, but the clergy, who were unremitting in their exertions, all escaped. The persons who had charge of the cholera hospitals also, and the carters who were constantly employed to carry the sick to the hospitals, and the dead to the cemeteries, all escaped.

As late as the 12th June, the existence of the disease was denied. On the 13th, the Board of Health first recognized its existence, and made their first report. They stated the number of cases for the last twenty-four hours, at 94, and the deaths at 23. On the 15th they reported 1204 cases, and 230 deaths, as being as nearly as could be ascertained the whole number from the commencement of the disease. A general panic was produced ; and perhaps had the effect of augmenting the number of cases. The next report estimated the cases for the twenty-four hours at 431, and the deaths at 82 ; and the next twenty-four hours 475 new cases, 102 deaths.

‘ During the first four or five days of the epidemic, the patient was subject, for the most part, to be attacked in one of the following modes : First, after a trifling diarrhoea of several days duration, to a few hours only, nausea, quickly followed by vomiting and an increase of diarrhoea would usher him into that mode of the disease, which may be called the second mode of attack. Second, the patient is affected with a slight blueness of the hands and face, sometimes accompanied by a distressing sensation of weight and burning in the stomach, rapidly followed by vomiting and diarrhoea : when the vomiting had once come on, the thirst would commence, and be intolerable ; cramps in the limbs and about the pericordia, blueness quickly extending towards the trunk ; profuse cold perspiration (if perspiration, it be) and loss of voice. The severer cases would terminate in death in a period from three to six hours, while some might run on to twelve, or more.

'After the first four or five days, the mode of the attack, was not so invariable ; for while burning thirst, pain at the stomach, cramps, asphyxia, perspiration, cadaverous coldness, and aphonia, characterized the malady, vomiting and purging might be absent, and yet the case run rapidly to a fatal termination.

'About this time, and still later, many cases assumed a febrile character, the first pyrexial period of which might be called the choleric. But the danger rended in this choleric stage, and the recovery of the patient depended wholly on arresting some one or two of the symptoms.'\*

The disease now spread in all directions throughout Quebec and Montreal.

By the tables annexed it will be seen that if these are correct, the disease was at its height on the 19th, on which day the greatest number of cases and of deaths were reported. From that period it began steadily though irregularly to decline, the greatest number of cases generally occurring on Mondays, in consequence of the dissipation which is practised on the Sabbath.

The cholera soon extended its ravages to the country in the neighborhood of Montreal and Quebec. The large towns situated upon the St. Lawrence, and the streams which flow into it, first felt its fury. It soon appeared at Kamarouska, about eighty miles from Quebec ; at Riviere Ouelle, Bertha, Point Levi, and Beauport. Between Montreal and Quebec, it exhibited itself at Lothiniere, Berthier, Point au Trembles, and Long Point.

Previous to June 15th, fourteen deaths had taken place at La Prairie, which is nine miles above Montreal. On the 17th, it shewed itself at St. Johns. It soon reached Buffalo, Lachine, Caughnawagha, Coteau de Lac Chateauguay, Cornwall, St. Regis, Prescott, Ogdensburg, Brookville, Kingston, and York, Chambly, Plattsburg, and Trois Rivieres. Nor did the villages and localities remote from public roads, escape. Between St. Johns and La Prairie its existence was

\* Dr. Nelson's Sketches of the History of Cholera in Montreal.

ascertained in several of the detached farms in the country. In the neighborhood of St. Johns, two cases occurred of persons residing three miles back from the main road, being attacked and dying of the disease. In the parish of L'Acadie, and in the seigneurie of St. George, a number of fatal cases took place. At the Tanneries de Roland, at the Cotè des Nieges, and in the small farms which line the banks of the Richelieu, fatal cases occurred.

The disease appeared to follow the course of the large rivers; a circumstance which may be accounted for by their being the course taken by the emigrants who had arrived this season in immense swarms, and spread over the Canadas. The character of those who come over, the fatigues of the voyage, the exposure to a new climate, are sufficient causes to render them proper fuel for the disease.

At Fort Miller, the cholera appeared upon the 16th. The person first attacked died suddenly, and soon after, his sister was seized in a similar manner, and shortly expired. Her husband was then attacked, had slight spasms, but no violent symptoms, and died. After these cases there appear to have been no more, until the 23d of July, when three cases and two deaths occurred.

*State of New York.*—A man died on board a steam-boat which came from Burlington to Whitehall, upon the 14th. On the 16th, a death took place in Whitehall, in the person of a porter, whose occupation it was to convey the baggage to and from the steam-boats. The man who died on board the boat had left Montreal in order to avoid the disease.

*Vermont.*—On the 18th, an intemperate female, who had resided for some years at Burlington, died there with symptoms of malignant cholera. No other case, however, succeeded.

*State of New York.*—The cholera appears to have at first passed over Albany and other large towns on the Hudson in its course towards New York; for it broke out in New York on the 1st of July, or earlier, two days before its appearance in Albany. At Greenbush, opposite to Albany, cases occurred

upon the 7th July. At Troy, no cases were reported until the 17th.

At Rochester, two cases were announced upon the 14th, the disease for the time passing over Schenectady and Utica on the Grand Canal. Soon after, cases occurred at Schenectady, but were not noticed at Utica, until about the 12th of August.

Cases occurred at Poughkeepsie, on the Hudson, about the 24th of July.

*Michigan Territory.*—In the mean time, the disease was extending itself along the borders of the Great Lakes. It soon reached Detroit, and produced considerable havoc among the troops there. The first case occurred on board a steam-boat, in a soldier of intemperate habits; and previous to the 11th July, seventeen cases and nine deaths took place.

*Pennsylvania.*—A case occurred at Erie, on the border of the lake, upon the 26th of June, in a subject who came from Quebec. She was an emigrant who had lost her husband by cholera in her passage to this country. She had arrived at Quebec on the second of June, passed through the Canadas to Buffalo, and thence took the steam-boat to Erie, where she was landed on the 22d. It is mentioned that on the 23d she washed the clothes of her deceased husband. On the 25th she was seized with cholera, and died on the 26th.

The next case in this state appears to have occurred at Pittsburg, on the second of July. In no place, however, did it assume the appearance of an epidemic until about the 16th, when it began its course in Philadelphia.

Cases had indeed occurred at intervals in Philadelphia; and rumors of its existence spread considerable alarm as early as the second or third of July, and prevented the usual celebration of Independence.

*New Jersey.*—On the 7th of July, a case took place at Newark, in the person of the wife of Capt. T., of one of the steam-boats. She came from New York on Thursday, the 5th July. She had been residing in that city, in the immediate vicinity of the disease. She had while there been some-

what unwell, and had taken medicines. On the morning of the 6th, a physician who called to see Captain T., who was ill with the common cholera, found Mrs. T. laboring under the symptoms of the malignant disease. She continued to grow worse, and died that afternoon. Soon after this, other cases took place; and between the 5th and the 17th, eleven cases and nine deaths occurred.

In Plainfield, a stranger who had been hospitably received into the family of Mr. V., died after a very short illness; and on the 18th, four members of the family were taken ill with symptoms of malignant cholera, and died the next day. Several other members of the family were afterward taken ill, but recovered.

Two cases were reported at New Brunswick on the 14th, both fatal; but, as in other parts of New Jersey, the disease does not appear to have extended rapidly, or done much mischief.

Cases occurred in Jersey City about the 26th. About the same time also, cases occurred at Trenton, Elizabethtown, Pedriktown, Millville and Patterson; also in Camden, Princeton and Burlington, etc.

*Rhode Island.*—Cases occurred at Newport and Providence on the 25th July.

*Connecticut.*—The disease extended itself with much more rapidity, towards the South than it did towards the Eastern States,—whether this should be attributed to the superior healthiness of these States,—to their being less of thoroughfares than the Southern,—or to whatever other cause.

The first cases which appeared were at New Haven, on the 14th. The subjects were Mrs. N. and her son, who had just arrived from New York. Soon after their death, the father and mother of Mrs. N. were attacked and died.

On Wednesday, 18th July, a child of Mr. S., who had died a short time before in New York of cholera, was taken ill and died. This child had also been in New York, and after its return stayed at Mr. J's., in the same house where the above cases occurred.

The next case seems to have been upon the 7th of August; and another occurred on the 13th. Since that time cases have continued to occur, at remote intervals.

From the 10th of July to the 24th of August, fourteen cases only occurred. Ten of these proved fatal; four recovered. Between the 17th and the 29th there were seventeen cases and four deaths only.

A case occurred at Hartford upon the 19th, which proved fatal within six hours from its commencement. On the next day another case took place. Both of these subjects however came from New York. Several cases soon after took place; previous to the 24th, the number of cases reported were four, and the deaths three.

Cases have also occurred at Norwalk, Milford, Fairfield, etc. They have, however, throughout this State been few, and taking place at irregular intervals.

*Massachusetts.*—A case occurred at North Brookfield on the 20th of July, in a subject who had recently arrived from New York. He was a merchant of about thirty years of age, and of regular habits. He was attacked in New York, the week previous with the symptoms of cholera, applied immediately to a physician, and was relieved. Supposing himself cured, he left New York and travelled homewards in the stage, journeying both night and day. He arrived at Palmer on Thursday morning, was there again attacked with the disease, but continued his journey to North Brookfield, and had no medical aid until three o'clock, P. M. He died before twelve the next day.

This case is worth noticing, because it may be considered remarkable, supposing cholera to be contagious, and that this was a case of malignant cholera (as from the symptoms and the account given by the attending physician it undoubtedly was) that no other case should have occurred in North Brookfield to this time, though it is now nearly two months since the death of this subject.

Nor did any other case occur in the State of Massachusetts

until the 15th of August, at which time two cases were reported in Boston. Cases occurred at Andover upon the 18th, and supposed cases at Shirley and Pepperell, a little earlier.

*Virginia.*—Leaving the cholera in the East, we will now go on to trace its march towards the South. It appeared in Norfolk on Tuesday, July 24th, and about the same time in Portsmouth, an adjoining village, and made considerable ravages among the blacks there; and previous to the 29th, twenty-one deaths took place.

One or two other places in Virginia have been slightly attacked, but in no other has it raged with much violence.

*Maryland.*—In Baltimore considerable alarm was produced by some suspicious cases and sudden deaths, which took place as early as the 2d of July. Here, however, as in other places, the disease was thought for some time to exist before it was officially recognized. On the 11th, some cases occurred, and on the 13th there had been sixteen, more than half of which had proved fatal.

At Annapolis, there were two cases on the 30th of July, both fatal.

*Washington.*—On the 14th of August, a young man who had for some weeks been affected with diarrhoea, was suddenly seized with the symptoms of malignant cholera, and died within five hours. The next cases seem to have been upon the 24th, when there were five cases and two deaths. On the 25th and 26th, there were nine cases and six deaths.

*North Carolina.*—Winton. Two cases were reported here on the 30th of August.

*Mississippi.*—The cholera, or a disease resembling it, was prevailing at Natchez among the blacks, on the 2d of August.

*Ohio.*—Cases have occurred at Sandusky. Previous to the 3d of August, four deaths had taken place. Several cases have existed also in Columbus, and in one or two other towns.

The cholera has prevailed to a considerable extent among the Oneida Indians.

Having thus taken a brief survey of the course of the disease, we will now go back and observe more particularly the phenomena attending it in the principal cities, besides Montreal and Quebec, which have been marked by its ravages,—the city of New York, Albany, Philadelphia, etc.

### *New York City.*

Whatever may be the causes of cholera, and the laws by which its course is governed, it is certainly remarkable that its march should be so irregular as it has been found to be; not spreading regularly over an extent of country, but occurring in towns and cities at distances from each other, without affecting intervening districts until a subsequent period. Thus, the first case reported at Albany occurred on July 3d, while the first reported in New York took place on the 1st.

Several cases occurred in New York at the first breaking out of the disease, at the same time in different parts of the city. The first cases mentioned, were those of Mrs. Fitzgerald, 75 Cherry Street, two children of Mr. F. and the mother of Mrs. F., Mr. Shannard, James St.; Mrs. Brutus, Oliver St., near Cherry St., John Hannasy, and Daniel McMarra, 15 James' Slip. Mr. Fitzgerald was also attacked, but recovered.

On Sunday afternoon, July 1st, a poor laboring man died in Greenwich village. All the other cases were in the neighborhood of Catherine Market, on the east side of the city. Cases continued to occur in different parts of the city. On the 2d, a case occurred at the corner of Reed and Greenwich St. of which we have a very particular account from Dr. Paine, with the post mortem examination.

On the 4th July, the existence of the disease was first officially recognized by the Board of Health, though we are informed from other sources, that the disease in fact had occurred much sooner than the date mentioned, and that the first case was on Thursday or Friday, the 28th or 29th of June. The

first case the particulars of which have been given, was that of Con. O'Neal, which was detailed by Dr. Charles A. Lee. He was taken sick on Friday, and remained fourteen hours before the attendance of a physician could be procured. The disease consequently proved fatal. The cholera soon spread itself throughout the city, attacking individuals without any premonitory symptoms, and collapse immediately taking place.

On Wednesday, the 4th, at 2, P. M., seven cases and four deaths were reported by the Board of Health. In this report the majority of the cases of disease were considered the common cholera of the season. A much greater number of cases and deaths had undoubtedly occurred previous to this time, and we find by Dr. Paine's statement, that from thirty to forty deaths had occurred. The number of cases from the 5th of July to the 1st September is shown in the annexed tables. (No. 3.) But the number of cases and deaths are here also much underrated.

By these tables it will be seen that the greatest number of cases took place upon the 21st July, when there were 311 cases and 100 deaths. On the day following, there were 239 cases, and 115 deaths. Upon the 25th, 153 deaths are reported; but this apparent increase is probably owing to more care being taken to ascertain with accuracy the number of cases and the deaths. From the 25th July, a gradual decrease took place, which continued with some irregularity through the month of August; when the Board of Health considered the disease so much abated as to render it proper to discontinue the daily reports.

### *Albany.*

Prior to the appearance of the cholera in Albany, the city was unusually healthy.\* Until about the 20th of June few diseases prevailed, and the mortality was less than common. From the 22d June to the 3d of July, only

\* Report of the Albany Physicians.

eleven deaths occurred, of these six were children. In a population of twenty-five thousand, an average of less than one death a day, for near two weeks, indicates a degree of health almost without a parallel.—From 30th June to 3d July, *not one single death was reported.*

From June 20th to July 3d, there was considerable sickness, though but few deaths, and physicians foresaw the coming danger in the great prevalence of diarrhoea and common cholera.

On the third of July, two cases of Asiatic cholera occurred, both of which were fatal. It increased and extended itself very gradually, the number of cases varying from day to day without a regular increase. The whole number of cases to 31st of July was six hundred eighty-nine, and the deaths two hundred and eight. The Board of Health, however, report that hundreds were, during this time, attacked with *cholorine*, or the mild form of the epidemic, but, by timely aid, the disease was prevented from assuming its malignant character. The poorer classes were the principal subjects of the disease; and one cause to which this circumstance is attributed, is the stimulating drugs administered by empirics, as preventives. In the part of the town, where the disease raged with greatest severity, it was almost uniformly found that the subjects had attempted, in this way, to fortify themselves against the disease. The two fatal cases which occurred on the 3d, were Wm. Teely, who lived at the foot of Maiden Lane, near Fish Slip, and Hugh Bradford in South Market Street, near the watering place. They were both men of irregular and intemperate habits, and the places in which they resided are said to have been extremely filthy. They both sickened at ten or twelve o'clock, and died about noon the next day.

### *Philadelphia.*

Some alarm was excited in this city by about the 3d July, as we have already mentioned, in consequence of the

supposed existence of several cases of cholera, so that the usual celebration of the anniversary of American Independence was omitted. The first cases recognized by the Board of Health were on the 16th July. There were at that time five cases: One female in Mead Alley (Southwark) dead; one female, St. John St., Northern Liberties, convalescent. One male, 91 Green Street N. L., convalescent; two females, Coates St. N. L., dead. On the 17th, a case was reported in South St. On the 18th, the Board reported that there was no new case, and that the subjects of two of the cases reported on the 16th, were out of danger, and the one reported on the 17th, improved.

It will be seen by the table subjoined that no new case occurred until the 24th. The next cases reported were upon the 28th, when six cases and five deaths took place. From this time, the disease advanced rapidly, and at the very time when its fury in New York began to abate, it began to show itself in its most formidable colors in Philadelphia. Upon the 6th, the greatest number of cases occurred; one hundred seventy-six cases and seventy-one deaths were reported; but of these, sixty-six cases and fourteen deaths took place in the vagrant department of one of the prisons. Since then all those who were well were allowed to depart; nevertheless, the cases on the 7th were one hundred thirty-six, and the deaths seventy-three. From this time, the number of cases and the deaths began to diminish, and towards the end of the month, about twenty cases and two or three deaths only, took place daily. The total number of cases which occurred previous to the 1st of September, was 2,192; and seven hundred forty-seven deaths. Taking the 28th July as the date at which it commenced its regular course, it required only nine days for it to arrive at its height,—nearly the same period as in Quebec, and Montreal, and about half the period it required in New York.

### *Newport.*

The cholera first appeared in Newport on the 25th of  
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July, in the persons of two ladies who had arrived from New York eight days before ; and had been detained during that period at quarantine, on board vessel. They had, it appears, been taken ill on the evening previous ; but this being unknown to the Board of Health, they were released from quarantine on the morning of the 25th, at sunrise. These ladies had left Montgomery county, forty miles above Albany where they had been several weeks on a visit, about the 12th July, in perfect health ; they took the steam-boat for Albany, on board which they remained four hours, and then continued their course to New York, landed on the west side and passed immediately over to the east side, through the upper part of it, to the packet Hero, on board which they embarked for Newport with thirty-five other passengers, on the 17th. After a passage of twenty-four hours they arrived at Newport, where all the other passengers took up their abode at the United States barracks, at Rose Island. They were dismissed from quarantine on the 25th, at sunrise. At nine o'clock a physician was sent for, whose attendance was urgently requested. No one appears, however, to have been obtained until about eleven, A. M., when Drs. Dunn and Hazard visited them, and applied the usual remedies prescribed for malignant cholera. Dr. Turner visited them about 12, M. He found one (Miss H., the first attacked) apparently in a state of irrecoverable collapse. Miss P., who was attacked a few hours later, though her case was a severe one, was rational, and continued for five hours capable of answering any questions put to her. Dr. Barrows, of Providence, visited them with Dr. Dunn in the afternoon. He found one in the arms of death, extremely livid countenance, respiration scarcely perceptible, eyes fixed, and the cold clammy sweat of death upon her, exhibiting all the appearance of one dying with the most malignant form of typhous gravior. The other appeared to be rapidly advancing towards the same stage. She appeared totally insensible. The haggard and sunken appearance of their countenances had been remarked by the woman of the house, at

their entrance. Miss H. died at eight in the evening, and Miss P. at one A. M. Two other passengers in the same vessel who performed quarantine on board, one Miss C., the other Mr. B., were seized with the same symptoms; which soon terminated fatally. Miss C. had continued on board the vessel during her stay at quarantine. Mr. B. had lodged on board, and taken his meals elsewhere. It was at first affirmed that the two persons first attacked had committed great errors of diet on the day previous; but on strict inquiry, this did not appear to be the case. Several cases soon after occurred; and what is remarkable, in the family of Mr. F. the person who buried Misses H. and P. A few days after the interment of these bodies, Mr. F. was attacked with violent vomiting, which produced some alarm, but the symptoms yielded to medicine. On the evening of the burial, he came home and slept with his child, who was taken ill August 3d, and died on the 4th, of malignant cholera. A few hours after the death of the child, the mother was seized in a violent manner and died in a few hours. Another child was taken ill, but recovered.

The next case appears to have been upon the 9th, and since that period, cases have continued to occur at irregular intervals; but the disease has not as yet become in that place entitled to the name of an epidemic.

### *Providence.*

The first case which occurred in this city, was that of Mr. J. T. aged 50, who was seized on Wednesday, July 25th, with vomiting and purging, which the family endeavored to combat until Monday, when they found it necessary to send for a physician; whose efforts for his cure were at first attended with success, until the evening of Tuesday, when mental excitement occasioned by hearing of his wife's illness, as is supposed, brought on a relapse, and he was attacked with spasms of the hands and feet, not severe, but continued. Mrs. Thurber, on Tuesday forenoon, complained of a slight uneasi-

ness in the bowels; but not so severe as to attract attention. About 3, P. M. she was attacked with violent vomiting, purging and cramps, that continued at intervals until a few hours previous to her death, which occurred on the morning of the 1st.

The third patient was a young girl of the name of S., aged  $3\frac{1}{2}$  years. She went to school apparently in perfect health, on the afternoon of the 31st. At a quarter before five, she complained to the instructress of feeling sick, and was sent home. Vomiting and purging soon came on, followed by coldness of the surface and a cessation of the pulse at the wrists. The usual symptoms of cholera ensued, and became more severe until 3 A. M., when she died.

The fourth case was that of the sister of the preceding, aged five. She was attacked about half past 3, A. M., August 1st, with pain in the bowels; the symptoms soon became severe, and collapse ensued before 1, P. M. A consultation was called on the night of the 31st. Mrs. T. was then in a confirmed state of collapse, the peculiar appearance of countenance was remarked, change of voice, coldness of tongue and breath, imperceptibility of the pulse, corrugated appearance of the hands; post mortem examinations were made; the appearances were entirely similar with those observed in New York. All these cases occurred in one house in an apparently healthy situation. Upon inquiry, it was found that there had been no communication with any individual from New York, or other infected place. Mr. and Mrs. T. resided in New York until June 11th, when they removed to Providence, several days previous to the official announcement of cholera in New York.

Sunday 26th, two cases occurred; on the 1st of September, two other cases; on the 2d, two, both fatal; and on the 3d, four cases, two of which were fatal. September 3d, four cases, two cases fatal; 4th, one case; 6th, three cases, one death.

#### MASSACHUSETTS.

We have already related the case of the gentleman who came from New York, and died of cholera in North Brook-

field, on the 20th of July. No other case was reported in any part of Massachusetts, until the 18th of August, when a case occurred at Andover. It is said, however, that there were cases in Shirley and Peperell, the symptoms of which closely resembled cholera, a week or two previous. In the former place, a man was seized with violent symptoms whilst mowing in a field, and died within twenty-four hours.

A case of malignant cholera occurred at Andover on Saturday, August 18th. The patient was Mrs. H. She had eaten for her breakfast a few stale clams and cucumbers, then went about her work, at which she continued until dinner time. She then went to bed and soon after, at 2, P. M. was seized with vomiting and spasms. At 3, P. M. was found by Dr. Kittridge in a state of collapse, cold and pulseless ; vomiting, and ejecting phlegmy watery matter only. External heat, &c. were applied, and in about three hours the circulation and warmth, were restored. She continued for twelve hours in a warm sweat, thirsty, but apparently doing well ; then sank into a stupid comatose state, with slight spasms of the muscles of the limbs, which continued until Monday morning ; when she died. She was sixty years of age, cleanly in her habits, temperate, and industrious. The daughters of the lady were afterwards attacked with vomiting, purging, and spasms, without great coldness or collapse. Four milder cases occurred at the factory, and two others about a mile distant ; one a son of Mrs. H. Locality, low and unhealthy.

The subject of the case at Haverhill, was Mr. C. who had been in the city of New York, which he left about the first week of July, on account of ill health. He had suffered from a fever in the spring, and had not entirely recovered from its effects, when he was attacked in June with diarrhoea, which continued. On the 25th of August, he made a journey to and from Lowell, during which his complaint became very much aggravated, and by evening appeared alarming. External applications of cayenne pepper, camphorated mercurial ointment, with continued friction and application of heat externally, were resort-

ed to, and with success. The next morning, the physicians found him speaking in a choleric voice, choleric countenance, secretions suppressed. His disease however yielded to the means employed for his relief. The place of his residence was unhealthy, and the occupants had formerly suffered from autumnal diseases. Another case occurred on the 27th, since which time none have been reported.

*Boston.*

August 13th. The city for some time had been unusually healthy, and very few deaths occurred. There were, however, in the early part of August, many mild cases of bowel complaints, but none of any severity. On Sunday, the 5th, some cases of disease occurred at the State Prison in Charlestown, which though perhaps not entitled to the name of cholera, were so remarkable that they deserve to be recorded. About half past twelve at night, the attention of the keepers was attracted by the cries of about thirty of the prisoners at the same time. On going to them, it was found that they had been taken with violent diarrhoea, and in some instances with vomiting and purging, accompanied with pains in the head and the region of the stomach and bowels. Assistance was immediately rendered, and most of them were relieved. The next day the cases increased, and before evening 118 had been attacked. The food of which the prisoners had partaken was examined and analyzed, but nothing poisonous or unwholesome discovered. Their diet had on Sunday been changed from potatoes to rice, and many of them had partaken freely of ginger beer. Many physicians, and among others, the gentlemen who had seen the cholera in New York, visited the patients; they pronounced decidedly that the disease was not Asiatic cholera, though somewhat resembling the mild form of this disease. No one was cold, or blue, or had a cold tongue. Neither did it appear to them to be the common cholera; but was peculiar in its character.

At the House of Industry, South Boston, on Sunday, the

5th, also, between 2, A. M. and 8, P. M. a number of the inmates were seized with diarrhoea and vomiting, in some instances attended with severe pain in the abdominal region, and in one with cramp and spasms, resembling the formidable symptoms of malignant cholera. Most of these attacks occurred before day-break, the patients awakening with severe 'cutting pains' in the bowels.\* These pains were instantly followed by copious evacuations, in some cases accompanied with nausea and vomiting. The only difference in the food which the patients had partaken the day before was that their soup was somewhat richer than common. Fifteen cases occurred on Sunday morning, and ten others during the day and night following. Most of the patients were convalescent on Tuesday. On Wednesday, 8th, the physicians reported three additional cases, in the State Prison, whose symptoms were similar to those first seized, but milder in degree. The former, with the exception of seven, were improving, and these were not materially worse. On Thursday, twenty-nine of the patients had recovered and were discharged from the hospital, i. e. the chapel which had been devoted to this use. All the others were convalescent. Four additional patients applied for admission to the Hospital.

None of these cases in the prison or House of Industry, proved fatal. In both places, the origin of the disease, and the disease itself, is still involved in mystery.

Cases of a similar nature occurred in the town of Charlestown, and many cases of common cholera occurred in Boston, especially in the vicinity of Fort Hill. Cholera, with spasms, was not uncommon. Still there were none, or but few very severe cases; and none certainly of malignant cholera. Whether the disease at the prison and elsewhere be entitled to the name of *cholerine*, and is produced by a peculiar constitution of the atmosphere, or from whatever other cause, we do not pretend to determine.

\* Dr. Howard's Report.

On Thursday, August 15th, the first cases of undoubted malignant cholera occurred in Boston. At half past 5, A. M. Dr. Osgood was called to visit Miss E. L. aged 25, in South St. place ; arrived at 6 o'clock and found her in the collapsed stage of malignant cholera. She had retired to bed at 10 the evening previous in good health ; was soon after seized with vomiting and purging, which continued without intermission until the time Dr. O. visited her ; he describes her situation at this time as follows : Countenance sunk and very distressed ; skin cold, flabby, *wet*, and inclined to a bluish tint ; strong spasms ascending from the feet to the abdomen, attended (of course) with severe pains ; contents of stomach and bowels, as exhibited in vessels, resembling an ounce of flaky rice mucilage floating in a pint of clear rain water ; the pulse at the wrist at that time was perceptible, but very flattered, the tongue lukewarm with a thin dirty white fur. At half past seven, pulse at wrist and extreinities imperceptible, in the carotid artery 120, tongue and breath cold ; spasms subsided ; no pain ; skin of the hands, &c. corrugated, blue, with cold clammy sweat, excessive thirst and craving for cold water. The thermometer applied to the chest and inside of the hands rose little above the temperature of the atmosphere. Except the gradual increase of blueness and the sunken and pinched appearance of the countenance, there was little alteration of the symptoms until death, which took place at 2, P. M. Twenty minutes after death, there was spasmotic contractions of the toes and fingers. Examination was made of the body in the presence of Drs. Bigelow, Ware, and Warren, who found the appearances corresponding to those generally described in malignant cholera. The second case is that of Miss F., a lady of about thirty-five years of age, who was visited by Dr. Seaton, the same day (15th.) She had been attacked with vomiting and purging about two hours before he saw her ; it then continued, accompanied with slight spasms,—was able to walk about the room. At half past three, Dr. S. saw her, found her extremities cold, pulse very small, great blueness, skin shrivelled, cold moisture over the body. Died at half past six.

A committee of the Health Commissioners were appointed to examine the premises in which these two cases of cholera occurred. They reported that the first patient was a single woman in comfortable circumstances; constitution not very robust, though seldom sick; not addicted to any indulgences injurious to health. She lived in a small brick building, on new made land, the situation low, but pretty well ventilated. The house appeared clean and pure in every part, drains unobstructed, cellar dry; the premises and immediate vicinity exhibited nothing calculated to generate or sustain a pestilential atmosphere. Miss L. was an intimate friend of Mrs. F. the other cholera subject, and a frequent visiter at her residence in Atkinson St. She was there on the Monday previous to her death, assisted her in taking care of several sick persons, and passed a considerable part of the asternoon and evening. Left there after 9 o'clock, and returned home, stopping only for a few minutes at her sister's in Short St. On Tuesday, she appeared in good health, was at home, and dined upon brown bread and milk with whortleberries. At 5 or 6, P. M. took tea with hashed corned beef, potatoes and cucumbers. In the evening visited Mrs. F., and returned about 9, stopping a short time at her sister's. Went to bed about 10; was seized soon after with vomiting and purging, which continued during the night. The family were roused about 4, A. M. and were desirous of having a physician, but the patient objected. Took some camphor, but with no good effect. About half past five, Dr. Osgood visited her, and found her in a state of collapse as above described.

The second case occurred in the 'Old Rand House,' in Atkinson Street. The situation is low,—inaccessible to currents of fresh air. The building is of wood, in a ruinous condition, scarcely habitable. In front, is a large yard covered with rank grass, which has been suffered to fall and decay where it grows,—overshadowed with trees which tend to keep it perpetually damp. In the rear, outhouses are falling to peices; the drain is obstructed, so that the waste water has

been permitted to overflow the surface, and every part exhibits the decomposition of vegetable matter. The establishment had been visited by the Health Commissioners who directed disinfecting substances to be frequently strewed in the cellar, and the cellar to be ventilated, and this had been done ; the tenants had also been advised to remove. The subject of this case, Mrs. F., aged forty-five, was an assistant of Mrs. Worcester in the domestic offices of the family. About nine days before her illness, five or six of the inmates of the house had been attacked with severe symptoms of common cholera. Mrs. F. acted as nurse, and suffered considerable fatigue and exhaustion, as well as deprivation of rest at night, and had been unwell eight days previous to her fatal attack. On the afternoon of Monday, Mrs. F. and Miss L. partook together of cherry rum and water, and on the next, the former was observed to drink repeatedly of cherry rum unmixed. As this was contrary to her usual habits, it is thence concluded that she experienced some of the premonitory symptoms of cholera. On Tuesday, Mrs. F. was out shopping both morning and afternoon. For dinner she ate fried veal and potatoes, and corn. Returned home between five and six, and took tea with bread and butter, cake, and pickled cucumbers. On Wednesday morning, she appeared well before breakfast, at which she ate heartily of beef-steak and bread and butter. Diarrhoea soon after came on, with faintness, and she took a wine-glass of cherry-rum. At 1, P. M. she was visited by a physician, as above mentioned.

Neither of these subjects had been out of the city further than Roxbury, or had any communication with an infected place or person as far as could be ascertained. It was reported that the first patient had washed the clothes of an individual recently from New York, but this was proved to be false.

No other case occurred in Boston, after these two, until the 24th, nine days after. A case then occurred in Carver St., a part of the city remote from the localities of the first two. The patient was a lad of ten years old, son of Mr. J. H. Schaf-

ser. He complained of sickness at 2 in the morning;—vomiting and purging ensued; at  $\frac{1}{2}$  past 6, Dr. Lewis was called, and other physicians. He died at  $\frac{1}{2}$  past 11. The post mortem examination presented the usual appearances found in persons who have died of malignant cholera. The premises were examined and found clean and in good order, with the exception of wet in the cellar; and the drain out of repair. No essential errors of diet were discovered. On the next morning, about 2 o'clock, a sister of the boy who had died, was attacked with diarrhoea, and at 7, another sister with diarrhoea and vomiting. Medical assistance was immediately obtained, camphor and opium administered, and the diarrhoea and vomiting checked; but in the course of twenty-four hours, diarrhoea returned, and the two sisters sunk into a state much resembling that of typhus fever, roused with difficulty. The symptoms in both cases corresponded with that of the boy who died; the two greatly differing from each other, however, in severity. Several other cases of vomiting occurred in the neighborhood.

The fourth fatal case of cholera occurred August 31, in the person of C. N., aged thirty, a woman of dissolute habits, who lived in Ann St. The house in which she lived was clean and well drained.

The next case was on Friday, September 7th, a female supposed about forty years of age who was found about 11, Thursday night, by watchmen in a state of apparent intoxication, who conveyed her to the watch-house of the district. She came from Newburyport, and had for several days been leading a vagrant life about the streets. Proper attention was paid to her, and she was supplied with cold water, of which she drank in abundance. At 3, A. M. she was seen by a physician who found her in the collapsed state of the disease, and had her removed to the Southern Hospital, where she died at  $\frac{1}{2}$  past 10, A. M. She presented the usual appearances, on examination.

On the 10th, another case occurred in Elliot St. The subject was a young man, aged 18, a chair painter, of good habits

and healthy appearance. Had diarrhoea several days previous ; on the 9th, ate his meals as usual, complained in the evening of pain in his back, and had a plaster applied ; next morning went about his work, though not well,—was soon compelled to return and send for a physician, who saw him at 11 o'clock ; found him in a state of partial collapse, pulse barely perceptible, tossing in bed, much pain, no vomiting, but diarrhoea. Removed to Hospital, and died about 5, P. M. Examination 8, P. M. External appearances—no great degree of blueness, fingers and toes contracted, skin at extremities of fingers very much corrugated,—contractility of muscles remains. Muscles dark coloured. Intestines filled with a thin gruelly liquid ; no faecal matter. Small intestines in one part highly inflamed. Stomach containing fluid nearly the same colour as intestines. Bladder small, containing a little urine ; aorta very small, vena cava large, and distended with fluid black blood. Another case was sent to the Hospital this evening from the rear of Essex St.—died at half past eleven the next morning, September 11th. Three other cases terminated fatally on the same day, two of whom resided in Elliot St. The other was the fellow workman of the young man who died on the afternoon of the 10th. Another of the companions of the same, who resided usually in Elliot St., died in Charlestown, on the evening of the 10th. The next day, 12th, three more cases, also from Elliot St., terminated fatally.

Cases of severe cholic and common cholera have for six weeks past been very frequent, and evidently on the increase ; and a great number of these latter have been attended with spasms, and in some the rice water evacuations have not been wanting.

Most of these cases of common cholera and cholic yield with extreme ease to medical treatment.

Nearly all the subjects who have died of cholera here, have been examined after death, and presented, nearly all of them, the same appearances,—the intestines void of faecal matter, filled with a milky or gruelly fluid ; mucous coat slightly inflamed, and covered with a thick white fur.

We will give here an account of the examination of one of these subjects which presented the usual symptoms in a high degree.

J. R., aged about 36 ; five feet eight inches in height. He had diarrhoea several days previous to his attack, but continued to attend to his work until the evening of the 10th, when he went from home about 8 in the evening, apparently well. About 11, P. M. he was heard uttering cries expressive of severe pain. He was carried to the Hospital about 12, where he continued in severe pain all night, and died about 4 in the morning.

Examined at half past 9, A. M. Muscles strongly pronounced over the whole body externally, rigid, no sensible muscular contractions on the application of stimuli, blueness of the body very considerable, particularly about the face ; pupil of the eyes natural, the eyes sunken ; lids surrounded by a very marked blue circle. Muscles very dark colored.

*Cavity of the Thorax.*—Lungs anteriorly natural, partitions of the lobuli very dark colored, adhesions of the lobes of the right lungs to each other. Remarkable dryness of the pleura ; the lungs and pleura being as it were glued together. Inferior lobe of right lung, engorged with blood ; the same on the left side. Pericardium dark colored, vessels of the heart very dark colored, apparently forming inflammation at the anterior surface of the heart ; left ventricle firmly contracted, right ventricle filled with blood, some small coagula in the left ventricle, fluid blood in the right, right auricle black colored, cava superior full of black blood.

*Cavity of the Abdomen.*—Surface of the liver adhering to the surrounding parts from want of serum ; color of the liver natural ; blood in the hepatic veins fluid, liver firm, does not tear readily, crepitæ very prominent ; gall bladder very full of green bile. Omentum having its vessels much injected ; external surface very dry from want of serum, exhibiting also patches of diffused redness like extravasation ; a red line between the omentum and its adhesions to the intestine on the sides.

Gastro-epiploic veins full of blood of a very dark color. Stomach much distended, anterior surface of its serous coat reddened, much contracted near the pyloric orifice; vessels of the small intestines uniformly injected, a red line indicating the contact of the folds of the intestines with each other; nerves of the solar plexus unusually distinct, mesenteric glands of a white color, small intestines moderately filled with fluid. Large intestines—cœcum contracted to a ball, colon contracted throughout, of a white color; the interior lined with copious white mucus, and containing a large quantity of fluid resembling water gruel, and sardinaceous green colored mucus. Mucous coat of the small intestines of a uniform red color, mesocolic glands uniformly enlarged, of a white color, not so large as in cases of dysentery. Slight fœcal smell in the small intestines, large intestines empty, mucous coat contracted, appearing as if macerated, cellular coat injected. Stomach containing about twenty ounces of a dark colored, dirty looking fluid, and about three ounces of potatoes and carrots, some pieces an inch long, and half an inch thick; mucous coat uniformly reddish, with patches of deep red in the left inferior part of the stomach. Pancreas natural. Duodenum not much reddened, the interior containing a watery fluid with many white flocculi, no appearance of bile. On pressure of the gall bladder, bile regurgitated through the fori biliarii into the liver, intermixed with blood. Spleen adhering to the surrounding parts, small, hard, very dark colored, tears more readily than natural. Kidneys firm, of a deep red color, confounding the cortical and tubular parts, external appearance not perfectly natural, of a roundish form. Bladder contracted.

Redness of the mucous coat less than usual in these cases, right semilunar ganglion more distinct and regular than usual; otherwise natural.

Since the cases above mentioned which occurred on the 12th, the following have been reported. On the 13th, no deaths reported. On the 14th, five cases. On the 15th, three cases; 16th, one; 17th, two; 21st, one; Oct. 1st, one.

We have thus completed our survey of the progress of the malignant cholera in America to the present time; we have traced its progress through every state which it has affected, from the Canadas to Carolina. We have endeavored to give a statement of facts merely, that may serve to throw light upon the disease, and to give all the details which we could obtain, with most strict impartiality; whether it favored the idea of the contagious nature of the disease, or the opposite opinions.

The principal places in which cholera has prevailed in America, are Quebec, Montreal, and New York. At the two former places, it originated among the lowest class of society; and the circumstances of a crowded population, unhealthy situation, and bad habits of life may account for the rapidity and the destructiveness of its march. But once having obtained a footing, the wealthier classes were soon subjected to its rage, and suffered equally with those first attacked.

At New York, its origin was in the same manner, amongst the very lowest of society; and it was to them principally that its fury was confined. The Five Corners, where the cholera made great havoc, contained in abundance all the materials of pestilence, if filth and putrefaction, and debauchery and drunkenness may be considered as such. Those who were the principal subjects of the disease, lived in damp cellars, with scarcely an article of clothing, in the extreme of dirt and wretchedness. Persons of good habits and in easy circumstances were sometimes attacked; but it is remarkable that these persons have not generally been those who were most exposed to the disease, or most devoted in their attentions to the sick. In one or two instances indeed, physicians have fallen victims to the disease, after extreme fatigue and exhaustion in the exercise of their professional duties. But these cases have been comparatively rare, and the attendants upon the sick have rarely been attacked, either in New York or the Canadas.

The course of the cholera has in many respects been re-

markable. It has followed in general the course of large rivers, and roads, and shown itself first in large towns, and cities, but from these has silently and slowly extended itself to the adjacent country, appearing in isolated cases in small villages and farms, remote from the road, and where no source of communication can be traced. Instances of this occurred, as we have mentioned, in the neighborhood of Montreal and Quebec.

The most ready mode of accounting for this preference which the disease shows to thoroughfares, and to those places especially, where large tides of emigrants have flowed in, is to suppose that the disease is propagated by contagion, and that the strangers bring with them the seeds of the disease, and communicate it to others. But is it not an equally probable supposition that they do not bring the fire, but only the fuel, and that they are therefore merely the first victims of a mortality, which would have prevailed a little later had they remained at home?

In the progress of the disease in several instances above mentioned, the cholera has first appeared at a city or port, on board a vessel lying at quarantine, or a steam-boat at the wharf. Within a few days after an occurrence of this kind, a case generally takes place in that city or port where the vessel lies. Does this show that the disease is imported and that the passengers who have been landed, carry with them the infection; or is it simply because from the confined and unhealthy air of the vessel lying at the wharf, those on board are rendered more susceptible of the influence of the atmospheric constitution? Certainly, were the ingenuity of men to be set at work to invent a mode of producing contagion or disease, they could discover none better than to confine a number of persons in a vessel, and allowing that vessel to remain at rest, so that there should be no change of air.

In Boston the disease seems to have shown some strange vagaries; as if determined to set at defiance all attempts to fathom its laws of propagation. The places in Atkinson St.

and South St. place were decent people of temperate habits ; they had been exposed indeed to the air of an unhealthy habitation, but it is difficult to imagine that the patient who lived in South St. Place should have been long enough exposed to the atmosphere of the ‘ Rand House,’ to produce the disease. The Carver St. cases are still more remarkable, as no sufficient cause of disease was found in the house where they occurred. Most of the other cases have been temperate, industrious, healthy people, and none of them had been any distance from the city. The cases occurred in different parts of the town, and the subjects in each place had held no intercourse, as far as we can learn, with the others. At any rate, the cases occurred at intervals too remote to suppose that the first subjects communicated the disease to the others.

The cases at Fort Miller, at Plainfield, N. J., at New Haven and at Providence, where several deaths took place consecutively in the same family, might seem to be strong evidence of the contagious nature of the disease. But it ought to be recollected that whatever cause may operate upon one individual of a family, may be supposed to affect them all ;— their living in the same house, drinking the same water, eating the same food, perhaps also the same constitutional predisposition, may all have their effect. We know that predisposition to certain diseases are inherited, such as consumption insanity, scrofula, etc. Some persons have a constitutional insusceptibility to certain diseases ; as to small pox, for example.

It was remarked of the disease when it first prevailed in Montreal and Quebec, that not a black man was attacked ; this however was readily explained from the circumstance of there being scarcely any blacks there. In places, however, as at the South, where the blacks are numerous, the disease has made great havoc ; in Norfolk and Portsmouth, nearly eight blacks to two whites have died of cholera. Among the Indians also, wherever it has appeared among them, it has proved highly destructive.

Maine and New Hampshire have thus far entirely escaped the disease ; how long their immunity will continue we cannot form an opinion.

One of the peculiar traits of the cholera is the remarkable tenacity with which it maintains its situation in any place where it has once appeared. After a single case has occurred, cases continue to appear, if not constantly, at least from time to time.

The disease appears at this time to have almost ceased in Philadelphia, cases occurring only at intervals ; the deaths for the week ending September 8th were eighteen of cholera. In Albany, few cases occur, perhaps one or two daily. In Norfolk also very few deaths take place. In New York there has been an increase, owing probably to return of numbers who had been absent. The week ending September 1st, there were one hundred thirty-eight deaths of cholera, and on the ensuing week ending September 8th, there were two hundred and one, making a total of 3197 deaths by cholera since the commencement of the disease.

*Conclusion.* The cholera appears now to be slowly continuing its course towards the south ; but prevails in no place, at present, with any great violence. The deaths by cholera reported in Philadelphia, for the week ending September 15th, were 8 ; for that ending the 22d, 5 only ; and at that period, the Board of Health reported that there was no case of cholera then existing in the city or its vicinity. On the 29th, however, 4 deaths are reported for the week ending that day. In Albany, the weekly report of deaths by cholera for September 8th, was 16 ; for the 15th, 3 ; for the 22d, 2 ; at which time the disease was considered extinct. In New York, the deaths during the week ending September 15, were 108 ; during that ending the 22d, 52 ; during that ending the 29th, 50. In Boston, all but one of the cholera hospitals have been closed.

## TABLE FIRST.—Quebec.

The following Table, showing the number of deaths from Cholera, is taken from the records of interments kept by the Clergy; it may therefore be considered as pretty accurate. The population of Quebec in the summer of 1831, was 27,562. The number of strangers arrived since, is estimated at 10,000, or somewhat less.

Date.	Deaths.	Date.	Deaths.
June 9	6	July 9	14
10	7	10	15
11	29	11	7
12	27	12	12
13	70	13	11
14	92	14	8
15	143	15	8
16	120	16	8
17	97	17	8
18	112	18	7
19	117	19	11
20	122	20	6
21	70	21	8
22	78	22	7
23	34	23	8
24	33	24	9
25	49	25	12
26	40	26	7
27	31	27	6
28	21	28	9
29	38	29	10
30	33	30	10
July 1	31	31	8
2	21	August 1	8
3	25	2	9
4	17	3	9
5	24	4	5
6	18	5	17
7	10	6	8
8	9		

Total, 11,790 deaths.

Whole number of deaths from June 8th to September 2d, is estimated at 2,218.

## TABLE SECOND.—Montreal.

The following is a statement of cases and deaths from the commencement of the disease to the 13th of July, inclusive :

Date.	Daily Cases.	Daily Burials.	Total Cases.	Total Deaths.
June 10 to 15	—	—	1328	176
16	381	86	1709	261
17	474	102	2183	363
18	261	128	2444	491
19	337	149	2781	640
20	165	94	2946	734
21	151	76	3097	810
22	109	52	3206	862
23	83	31	3289	893
24	51	21	3340	914
25	44	33	3384	947
26	26	23	3411	970
27	21	26	3432	996
28	22	20	3453	1016
29	37	21	3401	1037
30	32	22	3523	1059
July -				
1	23	17	3546	1076
2	13	20	3559	1096
3	11	14	3570	1110
4	23	17	3593	1127
5	22	12	3615	1140
6	19	4	3634	1144
7	13	9	3647	1153
8	14	11	3661	1164
9	10	9	3671	1175
10	7	6	3678	1184
11	14	10	3692	1190
12	14	10	3707	1500
13	9	10	3716	1510

*Weekly Summary of Cases and Deaths in Montreal.*

Date.	New Cases.	Deaths.	Total Cases.	Total Deaths.
June 16	—	—	1709	261
23	1580	632	3289	893
30	234	156	3528	1059
July 7	124	94	3647	1153
14	75	61	3722	1214
21	96	70	3818	1284
28	160	131	3978	1415
Aug. 4	180	136	4158	1551
11	89	101	4246	1652
18	64	79	4310	1731

Total number of Cases from June 9th to September 1st, 4835. Total of Deaths, 1843.

### TABLE THIRD.—New York.

Table exhibiting the number of Cases and Deaths which took place in July.

New Cases.					Deaths.			
Date.	City.	Hos.	Bel.	Tot.	City.	Hos.	Bel.	Tot.
July 5	18	3	2	20	10	2	—	12
6	11	13	—	24	8	7	—	15
7	42	13	—	55	6	6	—	12
8	29	13	—	42	10	11	—	19
9	18	30	57	105	4	10	14	28
10	44	22	43	109	6	13	25	44
11	45	31	53	129	10	15	25	50
12	32	39	48	119	10	16	25	51
13	27	39	35	101	10	22	17	49
14	43	43	29	115	15	29	22	66
15	60	53	20	133	28	31	15	74
16	92	50	21	163	45	32	17	94
17	60	63	22	145	20	28	13	61
18	65	59	14	138	22	36	14	72
19	114	77	11	202	42	28	12	82
noon	20	132	56	226	48	35	10	93
	21	191	71	311	61	29	10	100
	22	154	85	239	50	40	25	115
	23	165	42	231	46	17	10	73
	24	188	51	261	57	22	17	96
	25	99	44	153	21	32	5	58
	26	123	48	185	44	14	7	65
	27	73	36	112	23	18	5	46
	28	93	49	143	37	26	4	67
	29	61	58	120	19	15	2	36
	30	62	35	100	14	19	3	36
	31	59	52	112	23	20	3	46

### Cases and Deaths in August.

Date.	New cases	D'ths.	Date.	New cases.	D'ths.	Date.	New cases.	D'ths.
Aug. 1	92	41	Aug. 11	76	33	Aug. 21	52	18
2	81	38	12	67	23	22	48	22
3	90	24	13	105	23	23	72	28
4	88	30	14	42	15	24	45	20
5	96	29	15	75	26	25	37	14
6	101	37	16	40	12	26	50	23
7	89	32	17	63	21	27	40	13
8	82	21	18	76	19	28	41	10
9	73	28	19	56	18	29	21	6
10	97	27	20	58	13			

AUGUST 29th.—Total number of Cases from commencement of the disease, 5,835. Total of Deaths, 2,251. Voted by the New York Board of Health to discontinue the Daily Reports.

TABLE FOURTH.—Albany.

Date.	New Cases.	Deaths.	Date.	New Cases.	Deaths.
July 1	—	—	Aug. 1	32	8
2	—	—	2	20	6
3	2	2	3	19	7
4	1	—	4	26	8
5	7	4	5	19	2
6	12	2	6	26	14
7	10	3	7	20	7
8	11	3	8	8	6
9	18	5	9	16	7
10	22	7	10	19	6
11	28	9	11	15	8
12	10	3	12	22	7
13	28	7	13	16	9
14	27	6	14	16	6
15	17	6	15	18	4
16	29	7	16	8	3
17	23	8	17	12	5
18	21	5	18	26	15
19	20	6	19	12	10
20	22	7	20	11	5
21	40	11	21	23	8
22	19	14	22	22	8
23	27	5	23	28	14
24	19	10	24	20	5
25	29	7	25	9	3
26	32	7	26	12	6
27	40	13	27	12	6
28	28	18	28	9	3
29	35	17	29	7	1
30	26	10	30	5	3
31	29	6	31	4	1
Total,	632	208	Total,	472	181

## TABLE FIFTH.—Philadelphia.

Date.	New Cases.	Deaths.	Date.	New Cases.	Deaths.
July 16 24 25 26 27 28 29 30 31	5	3	Aug. 12 13 14 15 16 17 18 19 20 21 22	110	31
	1	1		130	49
	—	—		111	37
	—	—		73	23
	—	—		94	30
	—	—		90	26
	6	5		74	18
	6	1		49	11
	15	7		54	18
	19	9		51	9
	21	8		49	9
	40	15		33	10
Aug. 1 2 3 4 5 6 7 8 9 10 11	35	14	23 24 25 26 27 28 29 30 31	48	10
	45	13		24	10
	65	26		24	10
	176	71		30	6
	136	73		21	7
	114	46		16	2
	153	58		20	4
	142	39		20	3
	126	33		23	5

## TABLE SIXTH.—Baltimore.

Date.	Deaths.	Date.	Deaths.
Aug. 22 23 24 25 26 27 28 29 30 31	15	Sept. 8	28
	29	9	29
	14	10	23
	14	11	20
	12	12	25
	23	13	16
	12	14	19
	15	15	18
	13	16	8
	30	17	5
Sept. 1 2 3 4 5 6 7	20	18	6
	35	19	—
	35	20	10
	15	21	8
	21	22	2
	33	23	6
	55	24	4

Whole number of Deaths in Baltimore from the commencement of the disease, about 600.

**TABLE SEVENTH.—Washington.**

Date.	Cases.	Deaths.	Date.	Cases.	Deaths.
Aug. 28	4	2	Sept. 12	16	8
29	15	1	13	16	8
30	5	1	14	40	6
31	11	6	15	33	4
Sept. 2	29	3	16	8	3
3	21	9	17	23	6
4	42	16	18	21	5
5	42	21	19	31	9
6	46	11	20	2	1
7	64	10	21	—	—
8	59	8	22	—	—
9	62	15	23	5	3
10	42	13	24*	5	2
11	29	6			

\* The three last Reports are from the Hospitals only.

**THE END.**